Improving the Referral Process of the Two Week Wait Lung Cancer Pathway
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Background
Lung cancer is the third most common cancer in the UK, accounting for 13% of all new cancer cases and the most common cause of death, accounting for 21% of all cancer deaths. When diagnosed at an early stage 32% of people with lung cancer will survive the disease for five years or more. This reduce to around 5% when diagnosed at a later stage. Therefore early diagnosis and treatment is key, and accurate referral information is critical to facilitate earlier treatment.

This project is being undertaken at Northampton General Hospital (NGH), a medium sized district general hospital in England. The Trust is an accredited cancer centre and provides cancer services to a population of 880,000 across two counties. The project is being led by two fifth year medical students, supported by a Consultant and the Quality Improvement Team. Tasked with reviewing the Lung cancer pathway we discovered that there were issues with the quality of referrals from GPs to secondary care on the two week wait (2WW) referral pathway. The level of information provided on the referrals was highly variable.

What are we trying to accomplish?
- By March 2019 to improve the quality of referrals to the two week wait lung cancer clinic at NGH by 50%
- Referral form
- Education

Simplify current sections
Add new sections for smoking history, asbestos exposure, symptoms and comorbidities and medical history
Mandatory fields
Electronic communication
Discuss at GP federation
Protected learning sessions

Benefits:
- Referral form is easier to complete
- GPs know what information to include
- Clinic time is better utilised
- Anticipated reduction in breaches

How will we know that a change is an improvement?

OUTCOME (BASELINE): Percentage of referrals with key information included

<table>
<thead>
<tr>
<th>Information Included</th>
<th>Percentage of Referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Question 1</td>
<td>4%</td>
</tr>
<tr>
<td>Question 2</td>
<td>54%</td>
</tr>
<tr>
<td>Question 3</td>
<td>61%</td>
</tr>
<tr>
<td>Question 4</td>
<td>88%</td>
</tr>
<tr>
<td>Question 5</td>
<td>88%</td>
</tr>
<tr>
<td>Question 6</td>
<td>75%</td>
</tr>
<tr>
<td>Question 7</td>
<td>88%</td>
</tr>
</tbody>
</table>

What change can we make that will result in an improvement?

The current referral form was reviewed and Consultants in the department asked to comment on the information that they receive on the referral forms. The items that they identified as issues were: smoking and occupational history not included, no coherent summary, automated print of GP records included blood test results that were not relevant and pleural clinic patients were treated as 2WW patients. This led to delays as the necessary information was requested. This was inefficient and could lead to patient breaches. The form was redesigned, taking these issues into account.

Clearer wording to guide GPs to which pathway was appropriate, was added as well as a box for additional referral information to confirm why the patient needs a 2WW clinic appointment. Tick boxes were added for symptoms, smoking history and asbestos exposure. Further boxes were added to enable comorbidities and past medical history to be added and pack years for smoking to be included. The previous (figure 1) and revised sections (figure 2) can be seen below.

Conclusion & What’s Next?
Early diagnosis and treatment of lung cancer has a huge impact on prognosis. Ensuring that the information received at the initial referral stage is accurate and adequate avoids time wasted in clinic collecting and checking the information and history. This ongoing quality improvement project aims to optimise the referral process, making it easier and more effective. This will allow our staff to concentrate on the patient, and ensure that a diagnosis can be made more quickly and treatment can begin promptly. This will make the clinics more effective and has the potential to improve outcomes for our patients.

Although there is still a way to go to implement our 2WW lung cancer clinic referral form and educate GPs to enable them to complete it effectively we are confident this will have an impact and make a real difference to staff and patients.